

|               |             |       |                |                     |
|---------------|-------------|-------|----------------|---------------------|
| SERIAL NUMBER | FILING DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
| 09/091,735    | 06/24/98    | 395   | 2756           | 36-1230             |

APPLICANT IAN DUNCAN BRAMHILL, SUFFOLK, GREAT BRITAIN; MATTHEW ROBERT CHARLES SIMS, SUFFOLK, GREAT BRITAIN.

\*\*CONTINUING DOMESTIC DATA\*\*<sup>N</sup>\*\*\*\*\*  
VERIFIED

CAN

\*\*371 (NAT'L STAGE) DATA\*\*<sup>Y</sup>\*\*\*\*\*  
VERIFIED THIS APPLN IS A 371 OF PCT/GB98/00808 03/18/98

CAN

\*\*FOREIGN APPLICATIONS\*\*<sup>CAN Y</sup>\*\*\*\*\*  
VERIFIED EPO 97302194.2 03/27/97

CAN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/14/99

|                                                                       |                                                                                                                                                                              |                         |                     |                    |                         |
|-----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met           | <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>GB3 | SHEETS DRAWING<br>8 | TOTAL CLAIMS<br>27 | INDEPENDENT CLAIMS<br>2 |
| Verified and Acknowledged<br>Examiner's Initials _____ Initials _____ |                                                                                                                                                                              |                         |                     |                    |                         |

ADDRESS NIXON & VANDERHYE  
1100 NORTH GLEBE ROAD  
8TH FLOOR  
ARLINGTON VA 22201-4714  
PHONE: (703)816-4000

TITLE COPY PROTECTION OF DATA

|                                    |                                                                                                                       |                                                                                                                                                                                                                                                                           |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED<br><br>\$1,084 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

DO/EO BIBLIOGRAPHIC DATA ENTRY

|                              |                         |                           |                                     |
|------------------------------|-------------------------|---------------------------|-------------------------------------|
| SERIAL NUMBER:               | 09 / 091735             | RECEIPT DATE:             | 06 / 24 / 98                        |
| IA NUMBER:                   | PCT/ GB98 / 00808       | IA FILING DATE:           | 03 / 18 / 98                        |
| FAMILY NAME:                 | BRAMHILL                | DELAY WAIVED (Y/N):       | N                                   |
| GIVEN NAME:                  | IAN D                   | DEMAND RECEIVED (Y/N):    | <input checked="" type="checkbox"/> |
| PRIORITY CLAIMED (Y/N):      | Y                       | PRIORITY DATE:            | 03 / 27 / 97                        |
| NO BASIC FEE (Y/N):          | N                       | US DESIGNATED ONLY (Y/N): | N                                   |
| ATTORNEY DOCKET NUMBER:      | 361230                  | COUNTRY:                  | GBX                                 |
| CORRESPONDENCE NAME/ADDRESS: | CUSTOMER NUMBER:        | TELEPHONE                 | 7038164000                          |
|                              |                         | FAX                       |                                     |
| NAME:                        | NIXON & VANDERHYE       |                           |                                     |
|                              | 1100 NORTH GLEBE ROAD   |                           |                                     |
| STREET:                      | 8TH FLOOR               |                           |                                     |
| CITY:                        | ARLINGTON               |                           |                                     |
| STATE/COUNTRY:               | VA                      | ZIP:                      | 22201                               |
| EMAIL:                       |                         |                           |                                     |
| APPLICATION TITLES:          |                         |                           |                                     |
|                              | COPY PROTECTION OF DATA |                           |                                     |

TAB TO LAST POSITION,PUSH SEND